
2001-2002 MARIN COUNTY GRAND JURY

TITLE OF REPORT: Bio-Terrorism Preparedness in Marin

Date of Report: June 19, 2002

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BIO-TERRORISM PREPAREDNESS IN MARIN

SUMMARY

In the wake of last fall's terrorist attacks in the eastern United States, the Grand Jury conducted an inquiry into the County's ability to manage a bio-terrorism event in Marin. The results of that inquiry are not encouraging.

Although County officials initially took a number of important steps to mobilize the County's resources to respond to a bio-terrorism incident, they have not maintained a satisfactory level of attention to rectifying the obvious weaknesses in the County's Disaster Medical/Health Preparedness Plan. There is also a real possibility that the elevation of the Public Health Officer – a mid-level official in the Department of Health and Human Services – to a key decision-making role during a health emergency could prove awkward and confusing for those managing the emergency as well as the public at large. Moreover, staff training and exercises to test the Plan have not been carried out, and liaison with the medical community has been allowed to languish.

It should be noted, however, that the police and fire departments as well as the local hospitals in their respective roles as "first responders" to a bio-terrorism event have done an excellent job of improving their procedures and capabilities.

The Grand Jury urges senior County officials, particularly in the Department of Health and Human Services, to move rapidly to enhance the County government's ability to deal with bio-terrorism. Strong leadership reinforced with adequate financial resources is the key to optimizing the County's capacity to respond. The Grand Jury is aware that the Department of Health and Human Services recently developed a work plan to address some of the issues raised in this report. While we welcome this indication of the Department's intentions, more must be done to ensure that an adequate level of preparedness is achieved as quickly as possible.¹

¹ NOTE: As the Grand Jury was completing its investigative work, the Department of Health and Human Services provided an outline of the Department's work plan for the balance of this year to address some of the issues raised in this report. The Grand Jury welcomes this as a first step; nevertheless, the findings and recommendations contained in this report are still pertinent and should encourage County leadership to give this critical area the attention and priority it deserves.

BACKGROUND

The events of September 11, 2001 and the anthrax episodes that followed raised urgent questions about Marin County's ability to cope with terrorism, including a bio-terrorism attack. The Grand Jury decided to conduct a separate inquiry into the County's preparedness to deal with a bio-terrorism event after it became clear that the response to bio-terrorism (as well as chemical and nuclear terrorism) would involve a much greater role for the Department of Health and Human Services (H&HS) than most other types of terrorism.

This enhanced role for H&HS is underscored by the fact that H&HS is responsible for preparing a separate plan for coping with public health and/or medical emergencies, including bio-terrorism. This plan, called the Disaster Medical/Health Preparedness Plan (DMHPP), is linked to, but separate from, the County's Emergency Operations Plan.²

Another important feature of a health/medical emergency relates to the statutory authorities and responsibilities of the County Public Health Officer (PHO) in a health emergency. Once a local governing body (county or city) has declared a health emergency, the County PHO "may take any preventive measure that may be necessary to protect and preserve the public health from any public health hazard..."³ This statutory authority therefore makes the PHO one of the key decision makers in responding to a bio-terrorism incident even though he ordinarily occupies a position two levels below the Director of H&HS.

METHODOLOGY

Interviews Conducted

Individuals interviewed for this report included representatives from the Board of Supervisors, the Department of Health and Human Services, the Sonoma County Department of Emergency Services, Region II (Coastal Region) Regional Disaster Medical and Health Coordination Program, the San Rafael Police and Fire Departments, Kaiser Permanente Hospital and Novato Community Hospital.

Sites Visited

The H&HS Department Operations Center (DOC)

² See 2001-2002 Marin County Grand Jury Report entitled Emergency Management and Operations in Marin County.

³ Health and Safety Code § 101040.

Kaiser Permanente Hospital
Novato Community Hospital
The Sonoma County Emergency Operations Center

Meeting Attended

The Marin Operational Area Disaster Council Quarterly Meeting

Documents Read

1. Marin Operational Area Emergency Operations Plan, Marin County Sheriff, Office of Emergency Services, 1999
2. Marin Disaster Medical/Health Preparedness Plan, Department of Health and Human Services, 1998
3. Various materials on bio-terrorism provided by the County Office of Public Health, Kaiser Permanente Hospital staff, and Region II Disaster Medical and Health Coordination Program staff.

DISCUSSION

Until the anthrax attacks last September, the threat of a bio-terrorism attack was not high on the list of concerns of the general public. In fact, most medical professionals had little or no experience with this phenomenon. According to The Centers for Disease Control in Atlanta, high priority biological agents include organisms that pose a risk to national security because they can be easily disseminated or transmitted from person to person; cause high mortality, and have the potential for major public health impact; might cause public panic and social disruption; and require special action for public health preparedness. The most deadly of these agents are anthrax, botulism, plague, smallpox, tularemia, and viral hemorrhagic fevers. Because many of these pathogens are rarely seen in the United States, early detection by clinicians and rapid reporting to the local health department will be critical in minimizing the impact of a bio-terrorism event. In addition, a clear plan of action and chain of command, strong leadership, and well-trained staff will be crucial components to the successful containment of the event after it is identified.

Initial Response to September 2001

As the gravity of the anthrax attacks on the East Coast became apparent, local officials moved rapidly to improve the County's capacity to meet potential threats.

- Within weeks the Bio-terrorism Response Working Group⁴ developed a Bio-terrorism Threat Response Protocol for Suspicious Envelopes, Packages, or Spills which spells out the responsibilities of “first responders” (police, fire departments, hospitals) when presented with a potential threat.
- Under the leadership of the Public Health Officer and H&HS, a Hospital/Physicians Disaster Preparedness Roundtable⁵ was held and task groups were set up to address a variety of questions, such as decontamination capacity, medical personnel availabilities, public information and education strategies, monitoring illnesses, availability of pharmaceuticals, and so forth.
- There was also a general recognition that the Disaster Medical/Health Preparedness Plan, last revised in 1998, needs to be updated, and the Bio-terrorism Annex to the Plan needs to be made more operational.

Unfortunately, over the past several months this admirable start on strengthening the County’s capabilities to deal with bio-terrorism has not been vigorously pursued by senior County government leadership.

Why the Slowdown

Several reasons account for the loss of momentum in augmenting the County’s bio-terrorism preparedness. First, most senior County officials do not believe that Marin currently faces a meaningful threat from bio-terrorism. This view has been widely expressed in both public and private forums, which has apparently encouraged a more or less “business as usual” approach by mid-level County staff who are in charge of taking the necessary measures to improve preparedness. For example, County officials have not followed up with most of the working groups which were organized right after the September, 2001 events to check on what progress, if any, they are making. One exception to this general neglect is the Pharmaceutical Association task group efforts with the PHO’s staff.

Another important reason is the fact that the overwhelming majority of County employees who would have to respond to an emergency situation have other pressing responsibilities which tend to crowd out work on bio-terrorism preparedness planning and training. Without a strong lead from above, planning, training and exercises languish. For example, no training or exercises are currently scheduled for this year for H&HS, and the H&HS

⁴ Includes representatives from Golden Gate Bridge District, Kaiser Hospital, Marin County Environmental Health, Marin County Emergency Medical Services, Marin County Office of Emergency Services, Marin County Public Health, Marin County Sheriff’s Office, Novato Fire Department, Novato School District, Northern Marin Water District, and San Rafael Fire Department HazMat Team.

⁵ Includes representatives from Marin County Department of Health and Human Services, Marin County Office of Emergency Services, Marin Medical Society, Marin Pharmaceutical Association, Marin Health Care District Board, and the County’s three hospitals.

Department Operations Center (DOC) was not activated either during the State-sponsored exercise for hospitals in November last year or for the County-sponsored exercise in February this year.

No new direct hire or contract staff have been employed to work on bio-terrorism, apparently because the County is waiting for State and/or Federal funds to pay for new staff capacity. Specifically, H&HS has still not begun to update either the DMHPP, which was last revised in 1998, or the Bio-terrorism Annex to the DMHPP, which was completed in 2000. Moreover, while the PHO has compiled a list of equipment and staffing needs to guide allocation of Federal and/or State funds among County government entities, no one in H&HS is working to coordinate, or even monitor, steps that other local government groups and private organizations plan to take to strengthen their ability to respond to a bio-terrorism incident. Funds from the Federal or State governments will certainly have many strings attached but even so it seems sensible for H&HS to have an overview of how new monies for bio-terrorism (from whatever source) are likely to be used by other groups. It may even be possible to influence those decisions, thereby helping to optimize use of these funds to enhance the capabilities of the County as a whole.

Finally, during interviews the Grand Jury expressed concerns about the potential confusion related to chain of command authorities and responsibilities for the PHO and the Director of H&HS when acting in his capacity as Director of the DOC during a declared health emergency. The respondents expressed confidence that any problems which might arise would be satisfactorily dealt with at the time and downplayed any risks of confusion and/or disagreements on how to deal with the emergency.

First Responder Preparedness

Possibly because the police and fire departments and hospitals must cope with unpredictable situations on a regular basis, these organizations are all taking their roles in the event of a bio-terrorism incident with commendable seriousness and are diligently working to improve their capacity to respond. For example, the police give considerable weight to the possibility of some kind of bio-terrorism event, noting potential threats from terrorists, both foreign and domestic. They also maintain close liaison with the schools and hospitals and offer training courses to the public on police work in general through the Citizen's Police Academy. Regarding training and equipment, the San Rafael police have had strong support from the City Council in the past and have developed plans to procure more specialized equipment and training as funds become available.

Fire departments are also well prepared. A good illustration is having the San Rafael Fire Department serve as coordinator of the County's HazMat (Hazardous Materials) response capabilities. This arrangement, which draws upon personnel from other departments in the County, maximizes the effectiveness of this vital public service. Fire departments also offer excellent disaster training programs to the public; the Disaster Area Response Team (DART) program has been given to about 350 individuals so far. Finally, they have prepared lists of equipment and training requirements for their respective departments.

The hospitals are continuously attempting to upgrade their ability to cope with bio-terrorism. In such an event, Kaiser Permanente Hospital will serve as the primary medical care provider for potentially contaminated victims. Kaiser, Marin General and Novato Community hospitals will also call on resources from within their respective organizations, as required and feasible. Hospitals have professional training plans in place, and hold regularly scheduled training courses and exercises, including the annual state-sponsored exercise. Each hospital has developed lists of additional equipment and training needs, should additional funds become available.

FINDINGS

1. Much more can be done by the Board of Supervisors, the County Administrator, and the Director of Health and Human Services to take full advantage of the resources available within the County to prepare for a possible bio-terrorism incident, and to deal with one should it occur.
2. Although immediately following the September, 2001 events County officials led a commendable surge of activity involving both private and public institutions and individuals through the Hospital/Physician Disaster Preparedness Roundtable, follow-up actions have lagged in some areas. On the other hand, the Bio-terrorism Preparedness Working Group developed the Bio-terrorism Threat Response Protocol for Suspicious Envelopes, Packages, or Spills within a few weeks of the September events, a commendable achievement.
3. The County's Medical/Health Disaster Preparedness Plan, including its Bio-terrorism Annex, are out of date, especially in light of the new threats facing the United States. The Department intends to hire a consultant to update the plan as soon as Federal or State funds are available to cover the costs of the contract. This approach could significantly delay updating the plan and could seriously disadvantage the County in the competition for Federal and/or State resources as they become available.
4. Specific responsibilities for managing a bio-terrorism incident at the County level are somewhat murky, particularly regarding which officials would have primary responsibility. The statutes delineating the duties and responsibilities of the Public Health Officer contribute to this confusion in Marin where that position is situated two levels below the Director of Health and Human Services.
5. Communications between the hospitals and Health and Human Services staff have not been adequately tested, since the Department's Operations Center (DOC) has not participated in any state- or county-sponsored emergency preparedness exercises. Although communications between the Regional Emergency Operations Center staff and DOC staff appear to be satisfactory regarding routine activities, they have not been tested in an exercise either. No exercises are currently scheduled for the DOC.

6. Training opportunities for relevant staff have been insufficient in the past, and minimal training is scheduled for this year.
7. The Public Health Officer is preparing a list of new positions as well as training and equipment needs for the County to use when/as outside funding becomes available from Federal, State and possibly non-governmental sources. No one is coordinating the requirements/requests of other organizations, such as hospitals, for use of funds from these sources. This could lead to less than optimal allocation of these funds.
8. First responders (police, fire departments, hospitals) appear to be well trained and experienced, and have clear and practical procedures to deal with suspect incidents (see Finding Two above – Bio-terrorism Protocol). Coordination between local hospitals and the police and fire departments also seems excellent.

RECOMMENDATIONS

1. The Disaster Medical/Health Preparedness Plan (DMHPP), including its Bio-terrorism Annex, needs to be revised and updated. The working groups/task forces set up under the auspices of the Hospital/Physicians Disaster Preparedness Roundtable should be encouraged to complete their work as quickly as possible so those reports/efforts can be taken into account in developing the revised Plan.
2. The existing chain of command, specified in the DMHPP, should also be clarified to ensure that it is consistent with current State law and that decision-making authority is understood and accepted by the key officials.
3. The Department of Health and Human Services should move quickly to prepare and implement a training plan for appropriate County employees.
4. The Department of Health and Human Services Operations Center should participate in the next State level exercise and in the next County Emergency Operations Center exercise. In addition, the Department should devise its own exercise involving police, fire departments, hospitals, etc., and hold it within the next six months.
5. The Director of Health and Human Services should establish a coordinating group of organizations involved in dealing with bio-terrorism, chaired by the Public Health Officer, to share information on training and equipment needs. This group should make informal recommendations to appropriate decision makers about the allocation of new funds, with the goal of reducing gaps (and overlaps) in capabilities within the County.
6. The Board of Supervisors, the Director of Health and Human Services and the County Administrator's Office should provide strong, visible support to the staff charged with

implementing these recommendations. Senior leadership should aggressively seek funding from Sacramento and Washington but, given the likely lag in support from these sources, the Board of Supervisors should consider the immediate allocation of County funds to cover any additional contractor and/or personnel costs related to revising the Disaster Medical/Health Preparedness Plan and establishing a training and exercise program for Health and Human Services staff.

REQUEST FOR RESPONSES

Pursuant to California Penal Code Section 933.05, the Grand Jury respectfully requests a response from the Board of Supervisors to all Findings and Recommendations.

The Grand Jury respectfully invites a response to each of the Findings and Recommendations as follows:

Findings

County Administrator:	1, 3, 4, 7
Director of Health and Human Services:	All

Recommendations

County Administrator:	2, 4, 6
Director of Health and Human Services:	All

GLOSSARY

DMHPP	Disaster Medical/Health Preparedness Plan
DOC	Department of Health and Human Services Operations Center
H&HS	Department of Health and Human Services
PHO	County Public Health Officer